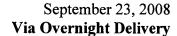
S	TATE OF SO	UTH CARO	LII	NA.	•)				PY 19519	
(•	Caption of Cas	e)			)	BEFORE THE PUBLIC SERVICE COMMISISON OF SOUTH CAROLINA				
					)	CO	OVER	LE	ETTER	
					))))))))	DOCKET NUMBER: <u>20</u>	<u> </u>	24	60C_	
(Please type or print)  Submitted by: Phone 1, Inc						SC Bar Number:				
Address:						<u></u>		503-7660		
		1170 Kane Concourse, Suite 402				<del>-</del>	305-371-4686			
		Day Harbo	Bay Harbor Island, FL 33154			Other: Email: pyu@phone1.com				
	Other: Auth	elief demande	ed in	epresentative	R	equest for item to be placed itiously  OF ACTION (Check a	aced or			
	Electric	cer one)		Affidavit						
	Electric/Gas					Letter Memorandum			Request Request for Certification	
	Electric/Telecon	nmunications				Motion			Request for Investigation	
	Electric/Water	mamounons				Objection			Resale Agreement	
	Electric/Water/T	`elecom.				Petition			Resale Amendment	
	Electric/Water/S			Brief	П	Petition for Reconsideration	on	П	Reservation Letter	
	Gas			Certificate		Petition for Rulemaking			Response	
	Railroad			Comments		Petition for Rule to Show	Cause		Response to Discovery	
	Sewer			Complaint		Petition to Intervene			Return to Petition	
区	Telecommunicat	ions		Consent Order		Petition to Intervene Out o	f Time		Stipulation	
	Transportation			Discovery		Prefiled Testimony			Subpoena	
	Water			Exhibit		Promotion			Tariff	
	Water/Sewer			Expedited Consideration		Proposed Order			Other:	
	Administrative M	<b>l</b> atter		Interconnection Agreement		Protest				
	Other:		П	Interconnection Amendment		Publisher's Affidavit				
					_					





2600 Maitland Center Pkwy.

Suite 300

Maitland, FL 32751

P.O. Drawer 200

Winter Park, FL

32790-0200

Tel: 407-740-8575

Fax: 407-740-0613

www.tminc.com

Docketing Department
South Carolina Public Service Commission
Synergy Business Park
101 Executive Center Dr.
Saluda Building
Columbia, SC 29210

RE: Phone 1, Inc

SC Authorized Utility Representative

Dear Sir or Madam:

Enclosed please find a copy of the SC Authorized Utility Representative, filed on behalf of Phone 1, Inc. No check is enclosed as there are no remittance fees due.

Please acknowledge receipt of this filing by date-stamping the extra copy of this cover letter and returning it to me in the self-addressed, stamped envelope provided for that purpose.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Kimberly N. Geuder

Compliance Reporting Specialist

cc: Dilowe Barker - Phone 1, Inc

file: Phone 1, Inc - Reporting - South Carolina

KG/mp

## AUTHORIZED UTILITY REPRESENTATIVE FORM COPY



TYPE: [X]IXC	[]CLEC	[] ILEC	[] Water	[] Sewer
		OMBANIS UNITOR	MANION	
Phone 1, Inc			FEIN/SSN:	
Company Name				
Dba/fka_			Telephone #:	305-371-3300
Mailing Address: 1170 I	Kane Concourse, Suit	e 402		
Bay Harbor Island, FL	33154			
City, State, Zip Code				
1170 Kane Concourse	Suite 402			
Business Location				
Bay Harbor Island, FL	33154	County:	Miami-Dade	
City, State, Zip Code				
Registered Agent: Nat  Mailing Address: 2 0  Columbia, SC 29223  City, State, Zip Code			TION	
Pursuant to the Comm	ission's rules and	regulations, pr	rint or type c	ompany contact
for the following areas	<u>:</u>			
A. Regulatory Office	cer: Peter Yu			
305-371-3300	/ 305-371-46	886 / py	u@phone1.co	om
Telephone Num	nber / Facsimile N	Number / E-	mail Address	
B. Customer Comp	olaints:		w.c	
	/	1		
Telephone Num	ber / Facsimile	Number / E	-mail Address	;

Pg. flof 2



C.	Engineering Operations:							
		1	1					
	Telephone Number	/ Facsimile Number	/ E-mail Address					
D.	Test and Repair:							
		1	1					
	Telephone Number	/ Facsimile Number	/ E-mail Address					
E.	Emergencies:							
	Emergencies:(During Non-Office Hours)							
		/	1					
	Telephone Number	/ Facsimile Number	/ E-mail Address					
F.	Financial: Syed Naqvi							
	305-371-3300	/305-371-4686	/syed@phone1.com					
	Telephone Number	/ Facsimile Number	/ E-mail Address					
G.	Customer Contact (Toll Free)							
	Dilowe Barker		Mrly Bohn					
	This form was complete	ed by	Signature					
	Title: COO		_Date: 8/25/2008					

RETURN COMPLETED FORM TO: Public Service Commission of SC

**Docketing Department** Post Office Drawer 11649 Columbia, South Carolina 29211

And

Office of Regulatory Staff **Attn: Jeanne Gordon** 1441 Main Street, Suite 300 Columbia, South Carolina 29201

(Rev. PSC05)

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